

State of Washington Application for a Water Right

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Date		Málik	Allera	

Please follow the attached instructions to avoid unnecessary delays.

	STATE OF THE STATE
Section 1. APPLICANT - PERSON, ORGA	
Name H/K HAAK I LLC	Home Tel: (509)837 - 3140
Mailing Address 2//3 Scoon Rd	
City Sunnyside State Wa Zip+4 9899	14 + 9157 FAX: (-)
Section 2. CONTACT - PERSON TO CALL	ABOUT THE APPLICATION
∑ Same as above ☐	112301 1112 W 1 210, 1113.
. /	Too 222 214
Name Henry Haak	Home Tel: (509) 837 - 3198
	Work Tel: (509) 840 - 1600 (cell)
City Sunnyside State Wa Zip+4 989	
Relationship to applicant	nber
Section 3. STATEMENT OF INTENT	Conduction on John
The applicant requests a permit to use not more than	3 8 00 /s per well of all some 8/1/01
cubic feet per second) from a \square surface water source or	ground water source (check only one) for the purpose(s)
of Dairy operation/milk product.	ground water source (check only one) for the purpose(s)
DESCRIPTION OF THE PLACE OF USE. (See instructi	ons.) NOTE: A tax parcel number or a plat number is not
sufficient. See (A) Estimate a maximum annual quantity to be used in acre-foot	per year: 88, 20,5
Estimate a maximum annual quantity to be used in acre-foot water use is daily	
Check if the water use is proposed for a short-term pro	ject. Indicate the period of time that the water will be needed:
From/_ / to//	
Section 4. WATER SOURCE	
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	IF GROUNDWATER
If SURFACE WATER	If GROUNDWATER A permit is desired for 2 well(s)
If SURFACE WATER Name the water source and indicate if stream, spring,	If GROUNDWATER A permit is desired for well(s).
If SURFACE WATER	
If SURFACE WATER Name the water source and indicate if stream, spring, lake, etc. If unnamed, write "unnamed spring," "unnamed stream," etc.:	A permit is desired for well(s).
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Name the water source and indicate if stream, spring, lake, etc. If unnamed, write "unnamed spring," "unnamed stream," etc.: Number of diversions:	A permit is desired for well(s). Size & depth of well(s): # 2 6'
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ECY 040-1-14 Rev. 7/97 ** f

APPLICATION

Appl. No.: 64-34526

Sec	ction 5. GENERAL WATER SYSTEM INFORMATION
A.	Name of system, if named: Well #1 - Well #2
B.	Briefly describe your proposed water system. (See instructions.) Water pumped from well # 1 + well # 2 daily as needed
	Well#1 - 6" X 280 ft - 3 HP motor at 100 ft - can pumps 6/22/89
	Well # 2 - 6" x 338ft - 7'2 HP pump at 84 ft- Considered artesian well - can pump 110 g per min
	See B)
C.	Do you already have any water rights or claims associated with this property or system? YES NO PROVIDE DOCUMENTATION. # 1 - Application # 64-30876 Lee C # 2 - C J 46 1 D 1 450 or W 087807
200000000000000000000000000000000000000	ction 6. DOMESTIC/PUBLIC WATER SUPPLY SYSTEM INFORMATION ompleted for all domestic/public supply uses.)
A.	Number of "connections" requested: Type of connection
D	(Homes, Apartment, Recreational, etc.)
В.	Are you within the area of an approved water system? If yes, explain why you are unable to connect to the system. Note: Regional water systems are identified by your County Health Department.
Con	nplete C. and D. only if the proposed water system will have fifteen or more connections.
C.	Do you have a current water system plan approved by the Washington State Department of Health?
	If yes, when was it approved? Please attach the current approved version of your plan.
D.	Do you have an approved conservation plan? If yes, when was it approved? Please attach the current approved version of your plan.
100000	ction 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION ompleted for all irrigation and agriculture uses.)
A.	Total number of acres to be irrigated: NA
B.	List total number of acres for other specified agricultural uses:
	Use Acres
	Use Acres Use Acres
C.	
	Total number of acres to be covered by this application:
D.	Family Farm Act (Initiative Measure Number 59, November 3, 1977) Add up the acreage in which you have a controlling interest, including only:
	 ‡ Acreage irrigated under water rights acquired after December 8, 1977; ‡ Acreage proposed to be irrigated under this application; ‡ Acreage proposed to be irrigated under other pending application(s).
140	
	 Is the combined acreage greater than 2000 acres? Do you have a controlling interest in a Family Farm Development Permit? If yes, enter permit no.:
E.	Farm uses:
*	Farm uses: Stockwater - Total # of animals 2250 Animal Type Dairy (If dairy cattle, see below) Dairy - # Milking 1250 # Non-milking 1000 From well # # # # # # Cleaning mulk parlor, * equipment - (3 wash cycles per day) Cleaning mulk parlor, * equipment - (3 wash cycles per day) Cooling system, flush system for alley in leafing barns etc ong. Water for animals, misc dairy needs
link	ong. Water for animals, misc dairy needs
	APPLICATION

Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water?

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deeper point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.
Section 9. DRIVING DIRECTIONS
Provide detailed driving instructions to the project site. From Yakima take I-82 last to Outlook/8.8 exit. Ho to town of Outlook. Dairy is located is mile east of Outlook on Outlook Rd + 14 mile North on Michols Rd at 211 Michols Rd. Both wells at the same location
Section 10. REQUIRED MAP
A. Attach a map of the project. (See instructions.) Lee D
Section 11. PROPERTY OWNERSHIP
A. Does the applicant own the land on which the water will be used? If no, explain the applicant's interest in the place of use and provide the name(s) and address(es) of the owner(s): (Note for info only - Fv + HankHaak Dairy lease the above described property from Haak I LLC
B. Does the applicant own the land on which the water source is located? If no, submit a copy of agreement:
I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with me. Haak I LLC Menuy Anak managing member Applicant (or authorized representative) Maren Laak managing member
$\frac{\text{Same}}{\text{Landowner for place of use (if same as applicant, write "same")}} \frac{8/10/01}{\text{Date}}$

☐ YES 🔯 NO

	for the following reason	n(s):	
Examination fee was not	enclosed		APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128
Section number(s)incomplete		is/are	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation:			
Please provide the additional info	ormation requested abov	e and return you	r application by
Ecology staff		Date	

To receive this document in alternative format, contact the Water Resources Program at (360) 407-6604 (Voice)

APPLICATION

Ecology is an Equal Opportunity and Affirmative Action employer.

or (360) 407-6006 (TDD).

Use this page to continue your answers to any questions on the application. Please indicate section number

before answer.